

Date Correction Plan Due 3/15/2024	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-440-7800
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Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction, if applicable. This form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1)(L) and (2)(k). Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and / or administrative rule. Public Schools may submit plans of correction however are not required to do so.

Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a licensed child care, post your copy of the noncompliance statement and correction plan near the license in accordance with Wis Stat 48.657. This request for a correction plan is not an order imposing a sanction or penalty pursuant to Wis Stat 48.715. If the department decides to apply a statutory sanction and / or penalty for facts arising from this finding or a future finding, you will be given notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Leading Paths Cc Dev Center		Provider Number / Facility ID Number 2000591362 / 001 200952R		
Address - Facility (Street, City, State, Zip Code) 1934 N Martin Luther King Dr Milwaukee WI 53123642		Telephone Number 414-467-5454	Date - Regulation Visit 2/22/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	251.04(2)(L)1 a Monitoring Results Posted Description: Monitoring results from previous licensing visit was not posted.	I will create a space on the information board for all plan of corrections	3/4/24	
2	251.04(6)(a)1. Child Record - Enrollment Information Description: Child enrollment observed incomplete. There was no emergency contact other than the parent or guardian on file for Child #2. Repeat violation: Previously cited on 11/15/2023	Child #2 EMERGENCY contact was updated immediately. I will moving forward thoroughly check and assure required information is filled out	3/4/24	

Name Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Leading Paths Co Dev Center		25002913-2 (13) 2704523		
Address Facility (Street, City, State, Zip Code)		Telephone Number	Date Regulation Viol	
1034 N Martin Luther King Dr Milwaukee WI 532123642		414-457-5454	2/7/2024	
Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	251.04(6)(a)6 Child Record - Health History Description: Health History and Care Plan observed incomplete for child #1 Child had a listed allergy with no triggers or symptoms	The center will make sure that the parents are more careful when filling out forms	3/9/24	
4	251.04(6)(a)6m Child Record - Immunization History Description: There was no record of immunizations on file for Child #1	I have now review each file and her record was misplaced I will be more cautious on filing forms	3/9/24	
5	251.05(2)(a)1 Staff Record - Personal Information Description: The staff record form was observed incomplete for Staff C. There was no educational qualifications or work experience listed Repeat violation. Previously cited on 11/15/2023	In the future I now plan to check ^{perform} more observation with taking time in reviewing forms thoroughly	3/4/24	
6	251.05(2)(a)3 a Staff Record - Physical Examination Description: There was no current staff health report on file for Staff F. Repeat violation: Previously cited on 11/15/2023	We the team will start a weekly audit to assure files off the employee check list is complete.	3/9/24	

Name: Certified Operator / Licensed Center		Prov. Lic. Number / Facility ID Number	
Leading Paths Co-Dev Center		20005713-2 / 0011-2004-021	
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Viol
1834 N Martin Luther King Dr Milwaukee WI 532123642		414-457-5454	2/22/2024
Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
7 251.05(3)(b) Abusive Head Trauma Prevention Training Description: There was no evidence of Abusive Head Trauma training on file for Staff B, Staff C, staff D or Staff G	Each staff member will be required to complete this course by registering mandatory no-exceptions	3/9/24	
8 251.05(3)(c) Cardiopulmonary Resuscitation Training Description: There was no department approved CPR/AED certificate on file for Staff b, Staff C, or Staff E Repeat violation: Previously cited on 11/15/2023	My staff will re take A BETTER CPR course that is accredited and will be updated before 4/1/2024	3/4/24 4/1/24	
9 251.055(1)(f) Child Tracking Procedure Description: Child tracking in the 1 year old classroom was observed inaccurate. There was one child not tracked accurately Repeat violation: Previously cited on 11/15/2023	Moving forward I will designate the office coordinator and myself check trackers multiple time daily. Just to be sure that all children are accounted for.	3/9/24	
10 251.06(10)(f) Bathroom Supplies Description: There was no paper towel available in the bathroom	I will assure and keep bathroom stocked on toilet tree tree and supplies.	3/4/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Leading Paths Cc Dev Center		20XLS41021001 2648508		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
1934 N Martin Luther King Dr Milwaukee WI 532123642		414-467-5454	03/27/24	
Rule/Statute Number	Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
11	251.06(2)(b) Electrical Or Hot Surface Protection Description: Electrical outlet in hallway observed uncovered	The Center will pay more attention to making sure outlets are covered daily	3/4/24	
12	251.07(5)(a)6 Menus - Changes Description: Menu changes were not noted	The Center will be advised if there is a sudden menu change to update menu.	3/4/24	
13	251.07(5)(b)5 Eating Surfaces - Cleaned, Sanitized Description: The table used at lunch time was not cleaned and disinfected before lunch was served	Leading Paths will host weekly meetings on how to properly sanitize a area before serving food	3/24/24	
14	251.07(6)(dm)2. Medical Log - Pages & Entries Description: medical log book entres were not properly documented. There were entres made in pencil and there was an entry with no signature Repeat violation: Previously cited on 11/15/2023	During my next staff meeting I will have an example ready for the staff. I will have them practice writing them as well as just to be cleared	3/9/24	

Name - Certified Operator / Licensed Center		Provider Number / Facility ID Number		
Leading Paths Cc Dev Center		2000591362 / 001 - 2068528		
Address - Facility (Street, City, State, Zip Code)		Telephone Number	Date - Regulation Visit	
1934 N Martin Luther King Dr Milwaukee WI 532123642		414 467-5454	2/22/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
15	251 07(6)(i)1 Washing Child's Hands & Face Description: A child's diaper was changed without hands being washed after	MOVING FORWARD I will have memo posted and printed explaining the proper way of changing diapers I will observe the teacher to make sure nothing like this happens	3/9	
16	251 07(6)(i)2 Adult Handwashing Description: A staff didn't wash hands before or after diaper changing	I will conduct a once a month inservice meeting on the proper way to change a diaper	3/4/24 will be held 3/11/24	
17	251 09(1)(am) Infant & Toddler - Intake Information	The infant/toddler intake information was onsite not sure what happened.	3/4/24	
18	251 09(1)(b) Infant & Toddler - Location & Sharing Intake Information Description: Intake for under 2 was not in the room the child was currently being cared for in. Repeat violation: Previously cited on 11/15/2023	The intake form will be reviewed and counted for each kid that is present	3/4/24	

Name - Certified Operator / Licensed Center Leading Paths Co Dev Center		Provider Number / Facility ID Number 2000591362 / 001 - 2000528		
Address - Facility (Street, City, State, Zip Code) 1934 N Martin Luther King Dr Milwaukee WI 532123642		Telephone Number 414-467-5454	Date - Regulation Visit 2/22/2024	
	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
19	251.09(1)(m) Infant & Toddler - Audio Monitoring Description: There was no audio monitor available in the infant room	I KNOW HAVE THE KNOWLEDGE ITS NEEDED I have now purchased two pieces 1 in room #2 in the office for extended monitoring	3/14/24	

NAME - Agency Worker
Tameka Thompson, Crescenta Sabree

Date Issued
3/1/2024

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Jasmine Grant

Date Signed

3/7/2024